DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: DEXTER ADULT FAMILY HOME (0010400)

Address: 15562 STATE HWY 16, SPARTA, WI 54656

License Status: REGULAR

Licensed/Certified/Registered 12/15/2003

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey	History

Survey ID: 0096968 End Date: 05/12/2006 Type: OTHER Purpose: VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0096545 End Date: 02/20/2006 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009781 Served 03/14/2006

		<u>Compliance</u>	
Deficiencies Cited	Subject Area	<u>Verified</u>	Corrected
88.04(5)(a)	TRAINING-15 HOURS WITHIN 6 MONTHS	03/23/2006	Yes
88.04(5)(b)	TRAINING-8 HOURS ANNUALLY	04/21/2006	Yes
88.05(4)(d)2.a	FIRE SAFETY EVACUATION PLAN REVIEW	02/28/2006	Yes
88.05(4)(d)2.b	FIRE EVACUATION ANNUAL EVALUATION	02/28/2006	Yes
88.06(3)(f)	REVIEW OF ISP		
88.07(2)(b)4	RECORD OF MEDICAL VISITS AND REPORTS	02/28/2006	Yes

Survey ID: 0091804 End Date: 12/15/2003 Type: INITIAL Purpose: SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

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